FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



LLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P27761

(6)

BRADEN CONSTRUCTION SERVICES, INC.

Principal Place of Business	Mailing Address	
5110 N. MINGO TULSA OK 74117	5110 N. MINGO TULSA OK 74117-4901	

FILED Apr 29 1997 8:00am Secretary of State



TULSA OK 741		5110 N. MINGO TULSA OK 74117-49	01				
					3. Date Incorporated or Qualified 01/17/1990	3a. Date of La 02/27/199	
2. Principal P	lace of Business	2a. Mailing Addres	S		4. FEI Number	33,37,103	Applied For
21 26				73-1352345		Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, et	C.		5. Certificate of Status Desired		5 Additional
27			Fee Fee		Required		
City & State City & State					00 May Be		
23		28			Trust Fund Contribution		led to Fees
Zip 24	Country	Ziρ	o. This corporation has italiately for intengrate park under a 100.002,				er s. 199.032,
24	9. Name and Address of Cur	rent Registered Agent	30		Florida Statutes 10. Name and Address of New Reg	Yes No	
71.00	PRENTICE-HALL CORPORAT			81 Name	10. Hallis and Address of How Ad-	gistered Agent	
		IUN STSTEM, INC.	Ļ				
110 NORTH MAGNOLIA ST.		-	82 Street Address (P.O. Box Number is Not Acceptable)				
IAU	LAHASSEE FL 32301		<u> </u>	83			
				B4 City		FL 85 7	Zip Code
11. Pursuant office or r agent. I a	to the provisions of Sections 607.9 egistered agent, or both. In the SI m familiar with, and accept the of	0502 and 607.1508, Florida ate of Florida. Such change bligations of, Section 607.05	Statutes, the ab was authorized 05, Florida Statu	ove-named co by the corpor ites.	rporation submits this statement for the p alion's board of directors. I hereby accep		ng its registered as registered
SIGNATURE	Signalure, typod or printed name of registered	Lauent and title of Applicable	MOTE Henistered	Aport signature rec	uired when reinstation)	DATE	
12.		AND DIRECTORS	13.	- ige i i ingi ana i i i i	ADDITIONS/CHANGES TO OFFIC		TORS IN 12
TITLE	Р	DELE	1.1 TH	.t		☐ Char	(
NAME	EDWARDS, LARRY D.		1.2 NA	ME .]
STREET ADDRESS	5110 N. MINGO		1.3 STR	EE1 ADDRESS			
CITY-ST-ZIP	TULSA OK		1.4 CIT	Y-ST-ZIP) }
TITLE	V	DILE	lE 2.1 TO	.E		Char	ge Addition
NAME	SILVER, JACK E., JR.		2.2 NAI	AE			
STREET ADDRESS	5110 N. MINGO		23 STR	EFT ADDRESS			
CITY-ST-ZIP	TULSA OK			Y-\$1-71P			
TITLE	ST	☐ DELE	TE 31 TH	.E		Char	ge 🔲 Addition
NAME	WILSON, JAMES P.		3.2 NA	v i lë			
STREET ADDRESS	5110 NORTH MINGO		3.3 S1F	REET ADDRESS			
CITY-ST-ZIP	TULSA OK			Y - \$1 - ZIP			1100
TITLE	D	☐ DELE				L_] Char	ige 🔲 Addition
NAME	MARTIN, VINCENT L.		4. ? NA				
STREET ADDRESS	411 E. WISCONSIN AVE.		1	EET ADORESS			
CITY-ST-ZIP	MILWAUKEE WI			Y-ST-ZIP			
TITLE	D TOAIN MADY	☐ DELE		- 1		☐ Char	ige Addition
NAME	TRAIN, MARK		5.2 NAI				
STREET ADDRESS	411 E. WISCONSIN AVE.			EFT ADDRESS			
CITY-ST-ZIP	MILWAUKEE WI	DELE		Y-S1-ZIP		Char	ge Addition
TITLE		L'1 DETE		ì		char	ige L Addition
NAME			6 2 NAI				
STREET ADDRESS				EET ADDRESS			
CITY-ST-ZIP			6.4 CIT	Y-S1-ZIP			

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 3 if changes, or on an attachment with an address.